

APPLICATION DATA SHEET**Application Information**

Application number::	
Filing Date::	
Application Type::	Regular
Subject Matter::	Utility
Suggested classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R?::	None
Number of CD disks::	
Number of copies of CDs::	
Sequence submission?::	
Computer Readable Form (CRF)?::	No
Number of copies of CRF::	
Title ::	METHOD OF DETERMINING SITE-SPECIFICITY AND KIT THEREFOR
Attorney Docket Number::	740073.462
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	
Total Drawing Sheets::	10
Small Entity?::	No
Petition included?::	No
Petition Type::	
Licensed U.S. Gov't Agency::	
Contract or Grant No::	
Secrecy Order in Parent Appl.?::	No

First Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: Sweden
Status:: Full Capacity
Given Name:: Robert
Middle Name::
Family Name:: Karlsson
Name Suffix::
City of Residence:: Uppsala
State or Province of Residence::
Country of Residence:: Sweden
Street of mailing address:: Frejs väg 21A
City of mailing address:: Uppsala
State or Province of mailing address::
Country of mailing address:: Sweden
Postal or Zip Code of mailing address:: SE-754 40

Second Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: Sweden
Status:: Full Capacity
Given Name:: Helena
Middle Name::
Family Name:: Nordin
Name Suffix::
City of Residence:: Uppsala
State or Province of Residence::
Country of Residence:: Sweden
Street of mailing address:: Stenbrohultsvägen 12NB

City of mailing address:: Uppsala
State or Province of mailing address::
Country of mailing address:: Sweden
Postal or Zip Code of mailing address:: SE-757 58

Third Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: Sweden
Status:: Full Capacity
Given Name:: Susanna
Middle Name::
Family Name:: Nyberg
Name Suffix::
City of Residence:: Ramlösa
State or Province of Residence::
Country of Residence:: Sweden
Street of mailing address:: Hårlemans allé 5
City of mailing address:: Ramlösa
State or Province of mailing address::
Country of mailing address:: Sweden
Postal or Zip Code of mailing address:: SE-256 57

Correspondence Information

Correspondence Customer Number :: **00500**

Representative Information

Representative Customer Number::		00500
----------------------------------	--	--------------

Domestic Priority Information

Application ::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	An application claiming the benefit under 37 USC 119(e)	60/430,244	12/02/02

Foreign Priority Information

Country::	Application number::	Filing Date::	Priority Claimed::
Sweden	0203548-3	12/02/02	Yes

Assignee Information

Assignee name::	Biacore AB
Street of mailing address::	Rapsgatan 7
City of mailing address::	Uppsala
State or Province of mailing address::	
Country of mailing address::	Sweden
Postal or Zip Code of mailing address::	S-754 50